

Attachment H

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, SS.

SUPERIOR COURT, ss.

SUZANNE GENEREUX, ET AL,
Plaintiffs,

v.

BRUSH WELLMAN, INC., ET AL,
Defendants.

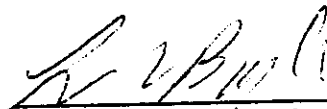
CIVIL ACTION
NO: 2004-02520-D

AFFIDAVIT OF PROOF OF SERVICE

I, Leo V. Boyle, attorney for the plaintiffs, certify that notice of service of process in the above-captioned case was made upon the defendant Kyocera Industrial Ceramics Corp. and copies of the Summons; Complaint and Jury Demand; Amended Complaint and Jury Demand; Civil Action Cover Sheet and Time Standards Tracking Order were mailed by certified mail, return receipt requested on September 9, 2004, to the said defendant's place of business at 24 Prime Park Way, Natick, MA 01760, and signed for on September 14, 2004, as per the attached signed return receipt.

The Plaintiffs,
By their Attorneys,

MEEHAN, BOYLE, BLACK &
Fitzgerald, P.C.



Leo V. Boyle, Esquire
Two Center Plaza, Suite 600
Boston, MA 02108
(617) 523-8300
B.B.O. 052700

Date: 9/15/04

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature X <i>Amanda White</i> <small>Post Agent</small></p>	
<p>1. Article Addressed to: CHIEF EXECUTIVE OFFICER KYOCERA INDUSTRIAL CERAMICS CORP. 24 PRIME PARK WAY NATICK, MA 01760</p>		<p>B. Received by (Printed Name) <small>Addressed</small></p> <p>C. Date of Delivery <i>9/14/04</i></p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
		<p>7099 3220 0008 3837 0814</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-11-1540

Attachment I

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, SS.

SUPERIOR COURT, ss.

SUZANNE GENEREUX, ET AL,
Plaintiffs,

v.

BRUSH WELLMAN, INC., ET AL,
Defendants.

CIVIL ACTION
NO: 2004-02520-D

AFFIDAVIT OF PROOF OF SERVICE

I, Leo V. Boyle, attorney for the plaintiffs, certify that notice of service of process in the above-captioned case was made upon the defendant Kyocera America, Inc. and copies of the Summons; Complaint and Jury Demand; Amended Complaint and Jury Demand; Civil Action Cover Sheet and Time Standards Tracking Order were mailed by certified mail, return receipt requested on September 9, 2004, to the said defendant's place of business at 8611 Balboa Avenue, San Diego, CA 92123, and signed for on September 13, 2004, as per the attached signed return receipt.

The Plaintiffs,
By their Attorneys,

MEEHAN, BOYLE, BLACK &
Fitzgerald, P.C.

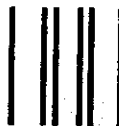


Leo V. Boyle, Esquire
Two Center Plaza, Suite 600
Boston, MA 02108
(617) 523-8300
B.B.O. 052700

Date: 9/20/04

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>CHIEF EXECUTIVE OFFICER KYOCERA AMERICA, INC. 8611 BALBOA AVENUE SAN DIEGO, CA 92123-1580</p>		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery 13 SEP 2004</p>	
<p>2. Article Number (Transfer from service label) 7099 3220 0008 3837 0760</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, February 2004</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p>	
<p>Domestic Return Receipt</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

MEEHAN, BOYLE, BLACK & FITZGERALD, P.C.

COUNSELLORS AT LAW

TWO CENTER PLAZA

SUITE 600

BOSTON, MASSACHUSETTS 02108-1922

GENEREUX (MBB)

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